

FIRST NAME: _____ **M.I.** _____ **LAST NAME:** _____

Use this form to address unusual circumstances or expenses during 2024-2025 that you were not able to report on FAFSA. **This review does not affect the New York State TAP award.**

- 1. Explanation of Special Circumstances:** Write a signed statement explaining your situation. Please be specific, including pertinent details such as what has changed, why the change occurred, and the dates they happened. Precise details will give us a clearer understanding of your situation.
- 2. Special Circumstances for Consideration:** Please check which special circumstance applies to you or your family. **Requests will not be processed without all required documentation.**

REASON FOR REQUEST

_____ Death of parent or spouse on _____
Date

*Attach copy of Death certificate or Notice.

_____ Termination of parent's/student employment on _____
Date

*Attach copy of termination notice, copy of last pay stub, and unemployment benefits statement.

_____ Retirement of parent(s) on _____
Date

*Attach documentation.

_____ Underemployment anticipated for 2024 tax year.

*Attach copy of pay record and statement explaining change in employment status.

_____ Medical Expenses.

*Provide documentation of expenses incurred during 2022 (not covered by insurance).

_____ Loss of taxed or untaxed income other than income earned from work.

*Document amount and provide explanation for loss.

_____ Other _____

Certification: All of the information on this form is true to the best to my knowledge. I agree to provide proof of information. I also realize that if I do NOT provide proof, no change will be made to the current FAFSA.

Signature

Date